### **Application Data Sheet**

## **Application Information**

Application Number::

Filing Date::

Herewith

**Application Type::** 

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

Title::

DEVICES FOR APPLYING ENERGY TO TISSUE

Request for Early Publication?::

No

Request for Non-Publication?::

No

Suggested Drawing Figure::

**Total Drawing Sheets:** 

10

Small Entity::

Yes

Petition included?::

No

Secrecy Order in Parent Appl.?:: No

#### **Applicant Information**

Applicant Authority type::

Inventor

Primary Citizenship Country::

USA

Status::

**Full Capacity** 

Given Name::

Thomas

Family Name::

**KEAST** 

Name Suffix::

City of Residence::

Mountain View

State of Province of Residence:: CA

Country of Residence::

**United States of America** 

Street of mailing address::

860 Park Drive, #3

City of mailing address::

Mountain View

Page # 1

State/Province of mailing address:: CA

Postal/ Zip Code mailing address:: 94040

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Christopher Lee

Family Name:: WILLINK

Name Suffix::

City of Residence:: Mountain View

State of Province of Residence:: CA

Country of Residence:: United States of America

Street of mailing address:: 126 Ada Avenue

City of mailing address:: Mountain View

State/Province of mailing address:: CA

Postal/ Zip Code mailing address:: 94043

Applicant Authority type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Ed

Family Name:: ROSCHAK

Name Suffix::

City of Residence:: Mountain View

State of Province of Residence:: CA

Country of Residence:: United States of America

Street of mailing address:: 430 Whisman Court

City of mailing address:: Mountain View

State/Province of mailing address:: CA

Page # 2

Postal/ Zip Code mailing address:: 94043

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

Dave

Family Name::

**HAUGAARD** 

Name Suffix::

City of Residence::

San Jose

State of Province of Residence:: CA

Country of Residence::

**United States of America** 

Street of mailing address::

750 Pershing Avenue

City of mailing address::

San Jose

State/Province of mailing address:: CA

Postal/ Zip Code mailing address:: 95126

Applicant Authority type::

Inventor

Primary Citizenship Country::

US

Status::

**Full Capacity** 

Given Name::

David

Family Name::

**THOMPSON** 

Name Suffix::

City of Residence::

San Jose

State of Province of Residence:: CA

Country of Residence::

United States of America

Street of mailing address::

793 Almondwood Way

City of mailing address::

San Jose

State/Province of mailing address:: CA

Postal/ Zip Code mailing address:: 95120

# **Correspondence Information**

Correspondence Customer Number:: 2

25226

# Representative Information

Representative Customer Number:	25226

## **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation in part of	09/946,706	09/04/01
09/946,706	Continuation in part of	09/908,087	07/18/01
09/946,706	Nonprovisional of	60/269,130	02/14/01
09/908,087	Continuation of	09/633,651	08/07/00
09/633,651	Nonprovisional of	60/176,141	01/14/00
09/633,651	Nonprovisional of	60/147,528	08/05/1999